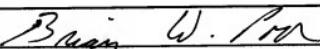


TRANSMITTAL FORM		Application Number	10/533,843
		Filing Date	May 4, 2005
		First Named Inventor	Hagen, Frederick S.
		Art Unit	1646
		Examiner Name	Zachary C. Howard
Total Number of Pages in This Submission	28	Attorney Docket Number	017881-001110US

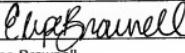
ENCLOSURES (Check all that apply)			
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC	
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/>	<input type="checkbox"/> Appeal Communication to Board
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/>	<input type="checkbox"/> of Appeals and Interferences
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a	<input type="checkbox"/>	<input type="checkbox"/> Appeal Communication to TC
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Provisional Application	<input type="checkbox"/>	(Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/>	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/>	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/>	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund		
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> CD, Number of CD(s) _____		
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Landscape Table on CD		
		Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Brian W. Poor		
Date	29 September 2008	Reg. No.	32,928

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being filed via EFS-Web with the United States Patent and Trademark Office on the date shown below.

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